## Calderdale and Huddersfield **NHS**

**NHS Foundation Trust** 

# rust News



YOUR STAFF NEWSPAPER MAY 2015

## New logo reflects the Trust's vision for care

OUR VISION for the Trust is **Together we** will deliver outstanding compassionate care to the communities we serve

Last year we carried out work with patients, visitors and staff and asked them what words they associated with the Trust. And I am pleased to say that 'compassion' and 'care' came out top.

As well as being safe and of high quality above all it has to be care with compassion.

That special personal touch in all areas, clinical and nonclinical, is what our patients and their families remember.

So, as to reflect what people told us, and to further help make compassionate care central to everything we do, this will be our new Trust logo. The four coloured hyphens underneath represent our four core divisions and icare represents how important it is for every one of us.

compassionate Care

It will be prominent on all our communications from now on just as it should be – as a constant reminder that this is what we are here for.

## Out and about

#### **OUR TEAMS** have been taking healthcare advice and support into our communities.

The Holme Valley Stroke Group was started last year by Ruth Thomas (CHFT's stroke and clinical lead occupational therapist) Caroline Pollard, who is a staff nurse, and Stephen Haywood, a stroke patient.

The event was held at Holmfirth Methodist Church from 2pm-4pm that was open to the public to offer advice and extra support for people who had suffered from a stroke, or was a carer for someone who had a stroke.

Stephen Haywood had previously suffered from two strokes and wanted to set up a group for people in similar circumstances to meet up regularly and talk about their experiences.

He said: "Getting people together to talk about stokes is very important, especially when you have had one and you don't know who to talk to. That is very important for recovery. My wife has arranged for a carers' corner, so people who look after stroke patients can share experiences with each other."

Ruth: "The afternoon was a essence was encapsulated by the



Huddersfield Community Rehab team Ryan Flanagan, Ruth Thomas, Caroline White, Helen Jordan, Stephen Haywood, Tracey Welsh, Mandeep Handa with members of the Stroke Association

gentleman, nearing tears, who said how much he had enjoyed talking to people in a similar situation for the first time since he had his stroke." Community colleagues in Calderda

were offering free blood pressure

testing in Morrisons supermarket, Halifax. Staff nurse Helen Kettlewell and district nurse Lindsay Oates, based at Nursery Lane medical centre and part of central Halifa



**Lindsay Oates checks blood pressure** 

more than 80 tests. A number were referred to their GPs. Helen said: "Morrisons were extremely helpful. It was a resounding success and we received good feedback from

## the general public and the staff." district nursing team performed



## **Acre Mills wins top** conservation award

OUR NEW outpatients' centre has won a top award from RICS Pro Yorkshire Building Conservation awards. Acre Mills was the Winner of the Conservation Project of the Year. The former wire mill was shortlisted for the award, and channel property guru Phil Spencer presented it.

Chairman of the RICS Pro Yorkshire Awards judging panel Colin Harrop said: "The standards of entries this year was phenomenal so our panel had an extremely tough job selecting the shortlist, let alone the winners, which really are the best of the best".

## Countdown to 'Care **Contact** Time' on June 4

ON JUNE 4 each ward area will be required to undertake a contact time study for 12 hours which will include each member of the ward team.

The Care Contact Time study is intended to identify the percentage of time spent by nurses on delivering direct and indirect patient care. It is a national requirement for all Trusts to complete the assessment of contact time by this summer.

This will be a big ask for all teams and we are putting in support to ward managers and ward clerks to carry out this assessment.

During this month we are providing training to each ward to use an "Activity Clocks" tool which we trialled during April.

**Deputy Director of Nursing** Jackie Murphy said: "I hope that the information we generate will be useful in planning how we make the most of the clinical time available to us."

Other trusts have used the findings from their contact time studies to make improvements to ward rounds and discharge processes which have reduced indirect care time for nurses by 7%. They have also done things

such as review the amount of blood tests requested when it was noted that a large proportion of time for staff on an early shift was dedicated to blood sampling.

This will be an opportunity for us to really look at what we do and the difference this makes to the compassionate care we provide to patients.

#### **CHFT-Weekly** Staff eNewsletter

Catch up on our latest **Trust News** 

**Catch CHFT** Weekly every Thursday - direct to your inbox!

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## Celebrating Success is happening



IF YOU or your team have achieved great things for our patients or colleagues, this is your chance to shine. Click on the Celebrating Success banner on the intranet for more information. Applications open on June 1st and close on July 16th so don't delay. Contact the Celebrating Success team at celebrating. success@cht.nhs.uk for more info.

#### **Grant Applications**

THE NATIONAL Institute of Health Research (nihr.ac.uk) aims to improve the health and wealth of the nation through research. The Trust has some funding available for any NHS health professional (doctor, nurse, pharmacist or allied health professional) who has an idea about how care can be improved, the funding has been allocated from the Department of Health.

All you need to do is submit a brief one page summary describing your idea and what you will do with the funds to Felicity Astin felicity. astin@cht.nhs.uk by 19th June. Informal discussions are welcome.

#### **Permit Reminder**

COLLEAGUES have until Monday, June 5 to submit their application for new parking permits.

We are asking all car parking permit holders to reapply and these will be considered under new criteria to achieve a fairer distribution of permits. This can be found on the intranet nww. cht.nhs.uk/divisions/corporate/estates-and-facilities/travel-department/.

The form should be completed and returned via email to car. parking@cht.nhs.uk or by internal post to: The Travel Dept, HRI.

## Global interest in PMU



Sarah Clenton, left, and Helen Wells at the event

HUDDERSFIELD Pharmacy Specials (our pharmacy manufacturing unit) exhibited at the Clinical Pharmacy Congress held at the Excel in London.

The event attracts pharmacy professionals from all over the UK and we met some keen delegates from China, Vietnam, Ghana, Bulgaria, Malaysia and Nigeria. We were there to promote our unlicensed medicines.

Sarah, pictured left, said: "We showcased some new products at the show which have created quite a bit of interest. One of them is an eye drop. The previous manufacturer has had to close down causing a national shortage and we have stepped in and developed it here in Huddersfield. We've had requests from all over the country for it."

## CHFT-Weekly

Staff eNewsletter

On our latest
Trust News



## A&E matron loses weight... and her wedding ring

A&E matron Gemma Berriman's had an amazing year getting healthy and losing weight.... but also, sadly, losing something very special. She's dropped four stones and dress sizes from 16/18 to 8/10. But in the process she's lost her platinum wedding ring. It went missing on Friday, April 10.

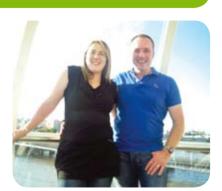
She said: "It's somewhere at HRI and I'm desperate to get it back. It's just slipped off my finger somewhere..."

Gemma's incredible weight loss effort started when 15 colleagues in surgical division paid £10 each with whoever losing the most

after 8 weeks getting the pot.
She said: "I wanted to lose weight for a while to feel and look better.
I won the money, that's how I got going, then I just kept it up!."

She followed Slimming World plan but didn't go to classes and started lots of running and now runs three 10ks a week. Later this year, she plans to do the Leeds Abbey Dash for charity.

Thanks to the four- stone drop she's a whole new wardrobe... but pines for her wedding ring. If you can help call her on HRI x 7405



Gemma before the diet, above, and now, far left

# Getting it right on discharges

Setting up a new, effective patient-led early discharge process is crucial for safe, quality, compassionate, care at CHFT.

Put simply it is a must, we need to have it in place as soon as possible and to achieve this we have a new team meeting weekly to drive our plans forward.

The team is looking a raft of possibilities to try and achieve the best early discharge process for our patients. Considerations currently being looked at include:

• Exploring how we can give our patients their probable discharge

date at the same time as their admission date if they are coming to us for an elective procedure. This will help them and their families to have their plans in place in advance for when they leave us. Looking at how we can best involve families in the discussions when a date is set while they still with us. Identifying patients who are fit to leave the next day and ensure they can have a nurse-led discharge (or criteria-led discharge) where this is possible and appropriate. Ensuring the discharge process continues over the weekends.

The team is made of our doctors, nurses, managers and our healthcare partners and include social services and primary care colleagues.

Supporting lead Joe Minton said: "We have to take a dramatically new look at how we work to improve our discharge process for our patients and their families.

"It means some really different ways of working and we know we can do it."

• For more information contact Caroline Smith caroline. smith@cht.nhs.uk

# Bear-ing up after an ace offort



OUR Super Ted's tremendous travels for Stroke Awareness month (May) are coming to an end.

Our cuddly toys have crossed the globe from Japan to New Zealand, USA to Russia spreading the FAST message about recognising strokes – Face, Arm, Speech and Time.

Andrea Moore and our stroke teams came up with the idea to spread the FAST message – which was a hugely successful TV advert in this country – across the world.

The teddies were so popular they even had their own Facebook page and had to be booked out for every venture.

Andrea said: "It's taken off like we never anticipated. It's been fun and it means FAST has saved lives across the world – with a little help from CHFT teddies."

For a full round-up of how many miles see June's Trust News. Best travelled Teddies since Paddington!!

## Undersea world created by students

A BIG THANKS to students at Kirklees College for creating an undersea magical land in the paediatrics room at A&E at HRI.

Our staff asked young under-16 patients what their favourite theme would be and the students created different views seen through portholes including a mermaid and an octopus.

The next step is to put "wet look" footsteps from the room to treatment room which will have a beach theme.

Our A&E sister and paediatric link Carol Whiteley asked the college for help – and is thrilled with the results. She said: "They are a huge hit – the octopus is really popular. We are very grateful!"



## Meet... the Neuro community rehab team



Neuro community rehab team: Avril Henson, Joanne Heads, Alan Farrington, Justine Laird-Boldy and Beth MacDonald

THE TEAM includes speech therapists, dietitians, physiotherapists, occupational therapists, nurse, and rehabilitation assistants. They are based in Huddersfield, although a similar service is offered in Calderdale.

People are mainly seen in their own homes and they also support patients who are admitted to hospital/intermediate care. The team also visits work places and gyms with the patient.

A highly effective pathway is in place. People will be referred to the team from consultants, following clinics, or more often from the specialist Parkinson's disease nurse (this post is currently vacant but is being recruited to), or their GP.

They encourage early referral to support patients to live well with their condition, to prevent problems, improve awareness, and inform them of the national/local support available to them.

They can also signpost them to other services, provide equipment and promote self-management. They provide treatment as required, work across the whole PD team as appropriate and carry out regular reviews as indicated in national guidelines.

This ensures they "nip things in the bud" with input from a team of staff which has built up a knowledge of and relationship with patient/carer, working with them in partnership to manage their condition at every stage of their care. This often involves our local PD support worker, the branch and colleagues in other services. Once known to our team, patients can self-refer back with any issues, or these will have been noted during the reviews of their condition.

**Anaesthetist Tim Jackson heads** up our Organ Donation team. Last year 14 people were able to become donors due to the sensitive expertise of our team - the most ever - and this month we staged our first simulated training event to share skills with more Trust colleagues. Find out more about Tim....

#### What is your position?

I've been a consultant anaesthetist at CHFT since 2008. As well as putting people to sleep for a living, my interests are critical care medicine, anaesthesia for vascular surgery and also vascular access.

#### Tell us about your career background?

I graduated from Leeds University in 1995 and have worked entirely in West Yorkshire, first in general medicine, then in anaesthesia and critical care

#### What are the best bits about your job?

The best bits are the teamwork – I work with some excellent colleagues at all levels, and it's a great buzz when you know that everyone's working well together to get the best outcome

for our patients and their families. The organ donation role has shown me that we also have some very enthusiastic staff who are passionate about facilitating our patients' wishes to give the gift of life after their own death, and it's humbling to work alongside them.

#### What is the highlight of your career so far? This is tricky! I guess the best day so far was being successful in my consultant interview. I wasn't widely known in my department as I hadn't actually worked in the trust at that time. I really wanted to work here, and by some stroke of luck I got

Sum up your role in three words?

the job!

Challenging (often), frustrating (occasionally), rewarding (almost always).

#### What did you want to be when you were growing up?

Medicine was the only career I've ever wanted to do. Before that, I wanted to be a pilot as my grandfather used to tell me about his wartime experience in the RAF and this always struck a chord with me.

#### Who is your hero/ heroine and why?

I've racked my brains but you'll have to make do with the cliché that it would have to be my dad. He's my best role model in life. and although none of us in life are perfect,

I always aspire to

live my life like he humble (I know I've already failed) and respectful and with a positive outlook as often

**Tim Jackson** 

as possible.

#### When you are not at work how do you relax?

As I go through my career, this is getting harder & harder. Juggling work and home life is seldom easy, so any quality time I can grab hold of with my partner Jayne is extremely precious; beyond that I enjoy reading, walking anywhere vaguely peaceful where I can simply unplug and let my thoughts wander away from life's stresses. A bonus would be a country pub at the end of the walk!

#### What is your favourite place?

There are so many! If I can get away with mentioning a few: pretty much anywhere in the Yorkshire Dales, watching the sun set from Castle Hill, sipping a coffee at a cafe in Covent Garden and just watching the world go by.

#### What would people be surprised to know about you?

Most people seem surprised when they hear I'm a bit musical (albeit shamefully lapsed since I started working as a Doctor) but I am a proud member of the Lindley Community Choir, which is about all the commitment I can manage these days.

#### Work instructions 1. Aerosols

THE Hazardous Waste (England & Wales) Regulations 2005 places a duty on Healthcare trusts to segregate aerosols. This includes aerosols that are commonly disposed of by householders into the domestic waste stream, namely air fresheners, deodorants and polishes.

As From the May 1, 2015 we are changing the way we disposed of aerosols waste within our 3 Main sites (HRI, CRH & ACRE Mill)

In order to have a universal method across the trust the following procedure should be followed for aerosol disposal: 1. Find a suitable empty cardboard box (may be worth asking materials management to leave one occasionally during the topping up process?) 2. Place the aerosols within the box until full. 3. Carefully seal the box and clearly mark as 'aerosols

#### 4. Place the box in the waste room for the porters to remove.

2. Safe disposal

for disposal' also include

ward area, date and initials for traceability reasons

of glass waste AS FROM the May 1, 2015 we change the way we disposed of glass waste within our 3 Main

sites (HRI, CRH & ACRE Mill) The trust will no longer purchase Daniels single use glass bins, in order to have a universal method across the trust the following procedure should be followed for glass disposal: 1. For old coffee jars etc, please

- remove the plastic lids and place in the domestic bin. 2. Find a suitable empty
- cardboard box (may be worth asking materials management to leave one occasionally during the topping up process?) 3. Place the jars within
- the box until full. 4. Carefully seal the box and clearly mark as 'glass waste for disposal' also include ward area, date and initials

for traceability reasons.

5. Place the box in the waste room for the porters to remove.

#### **BROKEN GLASS and/or CROCKERY**

For broken glass and/or crockery please amend as follows: 1. Find a suitable empty cardboard box (may be worth

asking materials management to leave one occasionally during the topping up process?) 2. For broken glass and/or crockery seal the box immediately to

reduce the risk of staff injury.

3. Mark as 'Broken glass waste for disposal' also include ward area, date and initials for traceability reasons.(see picture below) The 'BROKEN' el of the marking is important as the description will lead to a different disposal route for the porters so please be accurate.

4. Place the box in the waste room for the porters to remove.

## Marathon Joy



Ward 5's Joy Shaw's first marathon was a mixture of fears and tears.. and a sprint over the finishing line!! She was thrilled with her time of 4:27 at the London Marathon.

She said: "It was absolutely

amazing, the vibe, the crowd support - the whole experience. Very exciting and very moving."

She made a brilliant £1,400 in just four weeks for the Forget Me Not Trust, with the only intention of raising a couple of hundred quid. And she was overwhelmed with

the lovely messages and generosity and she became more excited when her phone 'pinged' with as every new donation came through.



#### Thanks and tears at cancer unit

PAUL and Jayne Bottomley have been back to present the Macmillan Centre at CRH with a trolley and it was a tearful event.

Jayne, from Sowerby Bridge, who has been in our care after she was diagnosed with ovarian cancer received the news she was all-clear on the same day!

Husband Paul, said: It was very emotional for us. We both cried. We cannot thank the teams enough and all our donations are our way of trying to saying thanks a million. You have been amazing!'

The couple have staged many fundraising events throughout Jayne's care and regularly return to hand over equipment to help other patients who are undergoing chemotherapy and other treatments.



TWENTY doctors, orthoptists, nurses and admin staff from our eye-care team have taken part in a hike up Snowdon to raise money for specialist equipment which will screen children to see if they need to wear glasses.

The team have now raised roughly £2,000 to go towards a plusopix, autorefractor which is an easy screening gadget. Consultants, healthcare assistants, orthoptists and administration staff at CRH and HRI took part.

Orthoptist, Aman Mann said: "I am very proud of the team effort on the day and building up to the climb lovely to be part of such a brave and hard work group of people. Thank you for everyone's kind donations. We have roughly raised £2,000 towards the target of £5,500 so please kindly keep the donations coming for a very worthy cause."

### Spirituality sessions

THREE members from our Trust's chaplaincy attended the University of Huddersfield and participated in the celebration of Nurses Day. They gave a presentation togeth on "Spiritual Care" to nursing students. The presentation was done by Rev George Spencer, Rev Martin Parrott and M Imran Hussain.

Rev George Spencer said: "As a concept 'spiritual care' tends to cause anxiety and morph into religious

care. As part of a programme to celebrate Nurses Day, three of us from the Trust's chaplaincy explored the meaning of spiritual care and how this involves issues of ultimate concer and values, whether patients and their families are religious or not.

"We reflected with nurses in training on the benefits of good holistic care for patients, but also how it was an integral part of delivering care."



**Rev George** Spencer, Rev Martin Parrott and M Imran Hussain

## **CHFT-Weekly**

Staff eNewsletter

Catch up on our latest **Trust News** 

## Farewell and all the best to colleagues!

#### Bye bye to Julie Dean after 36 years - exactly!

HRI A&E sister Julie Dean bade farewell after 36 years at the Trust. She joined as a student nurse on May 7, 1979 and her last day will be May 7 2015. Her colleagues put up banners at a surprise bash for her and presented her with gifts and flowers.

Julie said: "Everybody says they will miss the people, yet in A&E the people are special as everyone looks after each other and we are good at recognising skills and our strengths and work to them. In A&E you never know what patients may be coming in. There is such variety, I think I must be an adrenalin junkie."

Julie, who has worked in ICU, A&E and orthopaedics, plans more holidays (to keep up that fab tan!!) and DIY and she has qualified as a masseuse. She added: "I always said I would go when I am 55 and if I could afford to. The job has changed so much and is so different to when I started so now is the right time."

Colleague and A&E consultant Mark Davies, said: "Julie is the epitome of a good Emergency Department nurse. Whatever the circumstances she has always put her patients and her team first.' We wish her well!!





STAFF NURSE Glenys Guy retired in May, after 43 years' service with our Trust.

Colleague Helen Sykes said: "I know personally that Glenys will miss all her friends, colleagues and wonderful patients that she has looked after over the years.

"On a personal note. I will miss her so much, as we worked together for 15 years and she helped me so much through good and bad times."

A very happy and healthy retirement Glenys –x from all your colleagues in Surgical Outpatients at CRH.

### Melanie and Tania head to the Improvement Academy

MELANIE JOHNSON and Tania King have moved on.

Both Melanie and Tania left the Trust on Friday 8th of May for the Improvement Academy at the Yorkshire and Humber.

Melanie had worked for the Trust for 16 years starting on the Stroke rehab ward, then to Risk Manager. Her final role for the Trust was the General Manager for the Governance team.

Melanie said: "I will miss the people most! I have worked with some fantastic staff over the years and I will miss their support"

Tania King had worked for the Trust since 1986. She started off as an Occupational Therapist. Her last role at the Trust was Service Improvement Manager. Tania said: "What I'll miss the

most is definitely the people, and also my daily shot of caffeine from the Nespresso machine we clubbed together to buy in the office'

Tania is semi-retiring and will be working two days a week with Melanie at the Yorkshire and Humber Improvement Academy.

"I have just been to Huddersfield

how lovely the person was who

did my scan. They were really

pleasant and patient and even

showed me where to get on the

shuttle bus back to Halifax! Hope

my comments are passed on.

Thank you"

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#### Farewell to June after 46 years

JUNE GREENWOOD is leaving the Trust after 46 years! She joined Halifax Royal Infirmary as an enrolled nurse and moved to HRI in 2002 to ENT Outpatients. Her plans for retirement are gardening and a spot of

travelling, including a visit to America to see her little niece and also to Australia to see her other niece. She said: "I will miss my colleagues the most." Colleagues at Acre Mills presented her with flowers.

### Board level

The following is an account of the Executive Board (EB) and Board of Directors (BOD) key discussions held during April 2015.

#### WELCOME

The EB welcomed two new colleagues -Jackie Green, Interim Director of Workforce and Organisational Development, who will be providing additional workforce support to the Trust and Fiona Alcorn, Interim Director of Operations, who is supporting Julie Dawes, Director of Nursing, on operational performance.

#### **MANDATORY TRAINING**

The EB approved the Trust's approach to mandatory training, which would be implemented from 1 June 2015.

#### INTEGRATED PERFORMANCE REPORT

- The year-end position was noted: Over-performance on non-electives;
- non-electives were 8% above plan Increase in elective in-patients, day cases and outpatient

appointments and treatments

- Delayed transfers of care increase to 6.7%
- ●A&E position was 95.03% at the end of March with a quarter 4 performance of 93.6% - slightly below target. There continues to be a high number of patients medically fit for discharge who remain in the hospital
- 62 day cancer waits (screening) to treatment) target was not achieved due to one breach

The Boards were pleased to note that the A&E 95% target had been met for the year-end and wished to thank staff for their hard work in achieving this level of performance.

#### **FINANCIAL POSITION**

The EB and BOD were pleased to note that the re-forecast 2014/15 cost improvement programme (CIP) had been achieved. However there were still challenges for 2015/16 (a further £18m of CIP is required).

It should be noted that:

- Additional costs have been incurred as a result of staffing the additional bed capacity across the winter and the greater use of agency staffing
- CIP schemes delivered £9.86m against the planned £19.53m.
- £1.5m has been committed recurrently in-year to extra substantive nurse staffing to strengthen nursing ratios across ward areas
- £1.5m additional non-recurrent income to support quality investments has been received

**Executive and Non-Executive members** of the Trust continue to meet with Monitor on a monthly basis. Continue to send your ideas for how we can continue to make savings and efficiencies to efficiencypmo@cht.nhs.uk

#### **ALLOCATED SLOT ISSUES**

The EB noted the pressures in some specialties which were impacting on our capacity to provide patient appointments. A number of initiatives were being put in place to address the problems.

#### DIPC REPORT

One MRSA case has been assigned to the Trust. Aseptic Non-Touch Technique (ANTT) compliance is below the 95% target and training sessions are continuing.

#### **LEARNING INTO ACTION**

The EB discussed the need to build on our approach to develop learning and put ideas into action by wider use of our Work Together Get Results (WTGR) programme.

- The EB ratified the following policies:

   Management of Major Haemorrhage
- in Adults and Children
- Flood Plan
- COSHH
- Business Continuity Freedom of Information
- Patient ID
- Extravasation
- Medical Device Management

## Thanks for everything \*

compassionate care compassionate care compassion poassionate for a 4d scan. I just wanted to say

"I was referred by my GP at 9:10 to have a chest X-Ray at CRH. I drove their arriving at 9:45. I was guided by a member of staff in a light blue jumper to the dept – great. I was effectively – I was extremely impressed. The lady who conducted the X-Ray was friendly so quick I didn't even have to pay for car parking!! On leaving I asked reception if I could give some feedback. They didn't have a form but pointed me towards the poster 'Complain, Concern'. How negative! You guys do great work. Encourage/Help people to give positive feedback at point of use."

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\* All emailed to CHFT inbox by patients and their families

ppassionate nate care I had an accident (eye abrasion) & ite care Royal Infirmary. My positive feedback: the gent who treated me is an asset them, acted quickly to try easing my pain/were gentle/caring/efficient/ professional & explained aftercare

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Trust**News** is the staff newsletter all about you. Please let the communications team have all your success stories and good news - e-mail to lucy.mulcahy@cht.nhs.uk or 'phone 01484 355 253. The deadline for the next edition is Friday June 19.